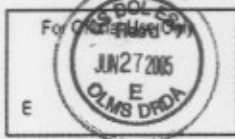


FORM LM-30

LABOR ORGANIZATION OFFICER AND EMPLOYEE REPORT

This report is mandatory under P.L. 86-257, as amended. Failure to comply may result in criminal prosecution, fines, or civil penalties as provided by 29 U.S.C. 439 or 440.



READ THE INSTRUCTIONS CAREFULLY BEFORE PREPARING THIS REPORT.

1. File Number U- <u>2432</u>	2. Fiscal Year Covered From: <u>1</u> / <u>1</u> / <u>2004</u> Through: <u>12</u> / <u>31</u> / <u>2004</u>
3. Name and address of person filing. Name <u>ROBERT H NICHOLS</u> P.O. Box, Bldg., Room No., if any <u>Suite 1000</u> Street <u>9550 WEST HIGGINS ROAD</u> City <u>ROSEMONT</u> State <u>ILLINOIS</u> ZIP Code + 4 <u>60018</u>	4. Name, file number, and address of labor organization. Name <u>AIR LINE PROTS ASS'N, INT'L, AFL-CIO</u> Labor Organization File Number <u>000-179</u> P.O. Box, Building and Room Number, if any Street <u>535 HANCOCK PARKWAY</u> City <u>HANCOCK</u> State <u>VIRGINIA</u> ZIP Code + 4 <u>20170</u>
5. Position in labor organization. <u>SENIOR CONTRACT ADMINISTRATOR / MEC COORDINATOR</u>	

Enter appropriate data below if, during the past fiscal year, you or your spouse or minor child directly or indirectly had any of the following interests (except as specified in the exclusions set forth in the instructions):

A. Held an interest in, engaged in transactions (including loans) with, or derived income or other economic benefit of monetary value from an employer whose employees your organization represents or is actively seeking to represent. Add New Part A	
6. Name and address of Employer (including trade name, if any). Name Trade Name, if any: P.O. Box, Bldg., Room No., if any Street City State ZIP Code + 4	7.a. Nature of Interest, Transaction, or Income. 7.b. Amount.

Signature

15. Signature and verification. The undersigned declares, under penalty of Perjury and other applicable penalties of the law, that all of the information submitted in this report (including the information contained in any accompanying documents) has been examined by the signatory and is, to the best of the undersigned's knowledge and belief, true, correct, and complete. (See the section on penalties in the instructions.)		
Signed <u>[Signature]</u>	On <u>6/21/2005</u> Date	<u>(847) 292-1700</u> Telephone Number

Name of Person Filing

ROBERT H. NICHOLS

File Number U-

2432

B. Held an interest in or derived income or economic benefit with monetary value from a business (1) a substantial part of which consists of buying from, selling or leasing to, or otherwise dealing with the business of an employer whose employees your labor organization represents or is actively seeking to represent, or (2) any part of which consists of buying from or selling or leasing directly or indirectly to, or otherwise dealing with your labor organization or with a trust in which your labor organization is interested.

Add New Part B

8. Name and address of Business (including trade name, if any).

Name COHEN, WEISS & SIMON

Trade Name, if any:

P.O. Box, Bldg., Room No., if any:

Street 330 WEST 42ND STREET

City NEW YORK

State NEW YORK ZIP Code + 4 10036

9. Business deals with:

☒ a. Labor Organization☐ b. Trust☐ c. Employer

10. If 9 b. or 9 c. is checked give trust or employer's name.

Name:

Trade Name, if any:

P.O. Box, Bldg., Room No., if any:

Street:

City:

State: ZIP Code + 4:

11.a. Nature of such dealing.

GENERAL COUNSEL

11.b. Approximate dollar value of such dealing.

12.a. Nature of interest held or income received.

Guest at 2 dinner paid for by law
firm - April 20, 2004

12.b. Amount.

\$50.00

C. Received from any employer (other than an employer covered under parts A and B above) or from any labor relations consultant to an employer any payment of money or other thing of value.

Add New Part C

13.a. Name and address of Employer or Labor Relations Consultant (including trade name, if any).

Name HILFMAN, MANN & BARR, P.C.

Trade Name, if any:

P.O. Box, Bldg., Room No., if any: Suite 1700

Street 33 N. Dearborn

City CHICAGO

State ILLINOIS ZIP Code + 4 60602

14.a. Nature of payment

Two Bottles of wine at
CHRISTMAS13.b. Is the Business an Employer ☒ or Consultant ☐ ?

14.b. Amount of payment.

\$30.00